### 2019 W-2 and Earnings Summary

Form W-2 Was Copy C — For EMPLOYEI This information is being furnished to the IRS. to file a tax return, a negligence penalty or oth imposed on you if this income is taxable and y Control number 0.31 0.2 KOLP	If you are required er sanction may be De	Statement 2019 OMB No. 1545-0008 partment of Treasury - ernal Revenue Service	201
Employer's name, address, and ZIP code AMENSYS INC 860 HEBRON PARKI LEWISVILLE TX 7	•	TE 604	Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay Less: Excess Wages Total Reported Wages
Employee's name, address, and ZIP code PRASHANTH KOLA 17711 MISTY GR DALLAS TX 7528	OVE DRI	VE ,	Tax Withheld
67320.00  1 Wages, tips, other comp.  3 Social security wages  5 Medicare wages and tips  7 Social security tips	2 Federal inco	rity tax withheld ux withheld os	Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay Total Reported Wages
11 Nonqualified plans  13 Statutory Retirement Third-party sick pay	12a 12b 12c 12d	care benefits	Tax Withheld
Employee's social security no. $ 748-12-4597 $ Employer ID number (EIN) $ 20-1672302 $ $ 15 \text{ St. } \text{ Employer's state ID number}                                    $	CASDI State wages, tips, etc.	183.00	PRASHANTH 17711 MISTY DALLAS, TX
CA 28872356 NC 600941656	18300.00 19170.00 Local income tax	971.79 847.00 <b>20</b> Locality name	The Form W-2 Box 1 wages are the Gro any additional compensation received a deferrals, health insurance, or other Set

	Wages, Tips, Other Comp. Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages and Tips Box 5 of W-2
iross Pay ess: Non-Taxable Earnings ess: Retirement Deductions ess: Other Pre-tax Deductions	\$67,320.00 \$0.00 \$0.00 \$0.00	\$67,320.00 (\$67,320.00) N/A \$0.00	\$67,320.00 (\$67,320.00) N/A \$0.00
ess: Third Party Sick Pay	\$0.00	\$0.00	\$0.00
ess: Excess Wages	N/A	\$0.00	N/A
otal Reported Wages	\$67,320.00	\$0.00	\$0.00
	Fed Income	Social Security	Medicare
	Box 2 of W-2	Box 4 of W-2	Box 6 of W-2
ax Withheld	\$9,151.93		
	CA State Wages, Tips, etc.	NC State Wages, Tips, etc.	
	Box 16 of W-2	Box 16 of W-2	
Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay Total Reported Wages	\$18,300.00 \$0.00 \$0.00 \$0.00 \$0.00 \$18,300.00	\$19,170.00 \$0.00 \$0.00 \$0.00 \$0.00 \$19,170.00	
	CA State Income Tax	NC State Income Tax	
	Box 17 of W-2	Box 17 of W-2	
ax Withheld	\$971.79	\$847.00	

# H KOLAWAR Y GROVE DRIVE , ( 75287

ross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus I after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement Sec. 125 cafeteria plan deductions, etc.

Form W-2 Wage and Tax Statement Copy B — To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the IRS.  Control number 03102 KOLP 00146  Employer's name, address, and ZIP code AMENSYS INC 860 HEBRON PARKWAY, SUITE 604  LEWISVILLE TX 75057					
Employee's name, address, and ZIP code PRASHANTH KOLAWAR 17711 MISTY GROVE DRIVE , DALLAS TX 75287					
67320.00 1 Wages, tips, other comp.	9151.93 2 Federal income tax withheld				
3 Social security wages	4 Social security tax withheld				
5 Medicare wages and tips 7 Social security tips	6 Medicare tax withheld 8 Allocated tips				
7 Social security tips	6 Allocated tips				
9 10 Dependent care benefits					
11 Nonqualified plans	12a				
12 Statutory Retirement Third-party	12b				
13 Statutory employee Patirement Sick pay	12d				
Employee's social security no. 748-12-4597 Employer ID number (EIN) 20-1672302	14 CASDI 183.00				
	6 State wages, tips, etc. 17 State income tax				
CA 28872356	18300.00 971.79				
NC 600941656	19170.00 847.00				
18 Local wages, tips, etc.	9 Local income tax 20 Locality name				

Form W-2 Wage and Tax Statement					
Copy 2 — To Be Filed With					
Employee's State, City, or		OMB No. 1545-0008			
Income Tax Return.			Dep Inte	eartment of Treasury - rnal Revenue Service	
Control number 03102 KOLF	>	00146			
Employer's name, address, and ZIP code					
AMENSYS INC					
860 HEBRON PAR	KW	AY, SI	JIT	ΓE 604	
LEWISVILLE TX	750	)57			
Employee's name, address, and ZIP code					
PRASHANTH KOI	JAW	AR			
17711 MISTY G	RC	VE DI	RI	VE ,	
DALLAS TX 752	287				
67320 0	$\cap$		a	151 02	
67320.00 1 Wages, tips, other comp.		Federal i	ncon	ne tax withheld	
3 Social security wages	4	4 Social security tax withheld			
5 Medicare wages and tips	. 6	Medicar	e ta	x withheld	
7 Social security tips		8 Allocated tips			
9		10 Dependent care benefits			
11 Nonqualified plans	1	2a			
	1	2b			
13 Statutory Retirement Third-party sick pay		2c			
		2d			
Employee's social security no.		4			
748-12-4597		CASDI		183.00	
Employer ID number (EIN)					
20-1672302					
15 St. Employer's state ID number	<b>16</b> St	ate wages, tips	, etc.	17 State income tax	
·		3300.0		971.79	
		9170.0	-	847.00	
		cal income tax		20 Locality name	

Form W-2 Wage and Tax Statement Copy 2 — To Be Filed With 2019						
Employee's State, City, or I Income Tax Return.						
Control 03102 KOLP 00146  Employer's name, address, and ZIP code  AMENSYS INC  860 HEBRON PARKWAY, SUITE 604  LEWISVILLE TX 75057						
Employee's name, address, and ZIP code PRASHANTH KOLAWAR 17711 MISTY GROVE DRIVE , DALLAS TX 75287						
67320.00 1 Wages, tips, other comp.	9151.93 2 Federal income tax withheld					
3 Social security wages 4 Social security tax withheld						
5 Medicare wages and tips	6 Medicare tax withheld					
7 Social security tips 8 Allocated tips						
9	10 Dependent care benefits					
11 Nonqualified plans	12a 12b					
13 Statutory employee Retirement plan Third-party sick pay	12c 12d					
Employee's social security no 748-12-4597	0. <b>14</b> CASDI 183.00					
Employer ID number (EIN) 20-1672302						
'	16 State wages, tips, etc. 17 State income tax					
CA 28872356 NC 600941656	18300.00   971.79 19170.00   847.00					
	19 Local income tax 20 Locality name					

#### **Notice to Employee**

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2019 or if income is earned for services provided while you were an inmate at a penal institution. For 2019 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517 Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social

Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than \$8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 instructions and Pub. 505, Tax Withholding and Estimated Tax.

#### Instructions for Employee

**Box 1.** Enter this amount on the wages line of your tax return.

**Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

**Box 5.** You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

**Box 6.** This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200.000.

**Box 8.** This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security trocord (used to figure your benefits).

(Instructions for Employee continued on back of Copy 2.)

### **Instructions for Employee** (Continued from back of Copy B.)

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only have SIMPLE plans; \$22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2019, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

**A**—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

**B**—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

**C**—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

**D**—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

**E**—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

**G**—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

**H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

 $\mathbf{J-}$  Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 $\mathbf{K-}20\%$  excise tax on excess golden parachute payments. See the Form 1040 instructions.

 $\begin{tabular}{ll} $L-S$ ubstantiated employee business expense reimbursements (nontaxable) \end{tabular}$ 

(Instructions for Employee continued on back of Copy C.)

## **Instructions for Employee** (Continued from back of Copy 2.)

**M**—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

**R**—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

**S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1).
Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
 W—Employer contributions (including amounts the

employee elected to contribute using a section 125

(cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount also is included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

**AA**—Designated Roth contributions under a section 401(k) plan

**BB**—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i)

**HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs)

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.